

| UTILITY PATENT APPLICATION TRANSMITTAL | | Attorney Docket No. 00-644 | |
|---|--|--|--|
| | | First Inventor Shafer | |
| | | Title HYDRAULIC FUEL INJECTION SYSTEM WITH INDEPENDENTLY OPERABLE DIRECT CONTROL NEEDLE VALVE | |
| (Only for new nonprovisional applications under 37 C.F.R. 1.53(b)) | | Express Mail Label No. EK 636937254 US | |
| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. | | ADDRESS TO: Commissioner for Patents Mail Stop Patent Application P.O. Box 1450 Alexandria VA 22313-1450 | |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) | | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) | |
| 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. | | 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) | |
| 3. <input checked="" type="checkbox"/> Specification (Total Pages 32) (preferred arrangement set forth below) <ul style="list-style-type: none">- Descriptive title of the Invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Detailed Description of the Drawings (if filed)- Claim(s)- Abstract of the Disclosure | | a. <input type="checkbox"/> Computer Readable Form (CRF) | |
| 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) (Total Sheets 9) | | b. Specification Sequence Listing on: <ul style="list-style-type: none">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); orii. <input type="checkbox"/> paper | |
| 5. Oath or Declaration (Total Sheets 4) <ul style="list-style-type: none">a. <input checked="" type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for a continuation/divisional with Box 18 completed)i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). | | c. <input type="checkbox"/> Statements verifying identity of above copies | |
| 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | | ACCOMPANYING APPLICATIONS PARTS | |
| 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: ____/ Prior application information: Examiner ____ Art Unit: ____ | | 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) | |
| For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. | | 10. <input type="checkbox"/> 37 C.F.R. 3.73(b) Statement (when there is an assignee) <input checked="" type="checkbox"/> Power of Attorney | |
| 19. CORRESPONDENCE ADDRESS | | 11. <input type="checkbox"/> English Translation Document (if applicable) | |
| <input type="checkbox"/> Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) | | 12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations | |
| Name Michael B. McNeil | | 13. <input type="checkbox"/> Preliminary Amendment | |
| Address Liell & McNeil Attorneys PC | | 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) | |
| PO Box 2417 | | 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) | |
| City Bloomington State IN Zip Code 47402 | | 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. | |
| Country USA Telephone 812-333-5355 Fax 812-333-3173 | | 17. <input type="checkbox"/> Other: | |
| Name (Print/Type) Michael B. McNeil | | Registration No. (Attorney/Agent) 35,949 | |
| Signature [Signature] | | Date 8-08-03 | |

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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17707 U.S. PTO
08/08/03

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Complete if Known

TOTAL AMOUNT OF PAYMENT (\$) 1114

Application Number
Filing Date
First Named Inventor Shafer
Examiner Name
Group / Art Unit
Attorney Docket No. 00-644

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:
- Deposit Account Number 500226
- Deposit Account Name Michael McNeil
- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- ☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed:
- ☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

| Large Fee Code | Entity (\$) | Small Fee Code | Entity (\$) | Fee Description | Fee Paid |
|----------------|-------------|----------------|-------------|------------------------|----------|
| 101 | 740 | 201 | 370 | Utility filing fee | 750 |
| 106 | 330 | 206 | 165 | Design filing fee | |
| 107 | 510 | 207 | 255 | Plant filing fee | |
| 108 | 740 | 208 | 370 | Reissue filing fee | |
| 114 | 160 | 214 | 80 | Provisional filing fee | |

SUBTOTAL (1) 750

2. EXTRA CLAIM FEES

| | | | | | | | | |
|--------------------|----|--------|---|----|---|----|---|-----|
| Total Claims | 38 | -20 ** | = | 18 | X | 18 | = | 324 |
| Independent Claims | 3 | -3 ** | = | 0 | X | 0 | = | 0 |
| Multiple Dependent | | | | | X | | = | 0 |

| Large Fee Code | Entity (\$) | Small Fee Code | Entity (\$) | Fee Description |
|----------------|-------------|----------------|-------------|--|
| 103 | 18 | 203 | 9 | Claims in excess of 20 |
| 102 | 84 | 202 | 42 | Independent claims in excess of 3 |
| 104 | 280 | 204 | 140 | Multiple dependent claim, if not paid |
| 109 | 84 | 209 | 42 | ** Reissue independent claims over original patent |
| 110 | 18 | 210 | 9 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) 0 324

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

| Large Fee Code | Entity (\$) | Small Fee Code | Entity (\$) | Fee Description | Fee Paid |
|----------------|-------------|----------------|-------------|--|----------|
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | |
| 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 | 130 | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for reexamination | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | Extension for reply within first month | |
| 116 | 400 | 216 | 200 | Extension for reply within second month | |
| 117 | 920 | 217 | 460 | Extension for reply within third month | |
| 118 | 1,440 | 218 | 720 | Extension for reply within fourth month | |
| 128 | 1,960 | 228 | 980 | Extension for reply within fifth month | |
| 119 | 320 | 219 | 160 | Notice of Appeal | |
| 120 | 320 | 220 | 160 | Filing a brief in support of an appeal | |
| 121 | 280 | 221 | 140 | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable | |
| 141 | 1,280 | 241 | 640 | Petition to revive - unintentional | |
| 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) | |
| 143 | 460 | 243 | 230 | Design issue fee | |
| 144 | 620 | 244 | 310 | Plant issue fee | |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | |
| 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17 (q) | |
| 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | 40 |
| 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) | |
| 169 | 900 | 169 | 900 | Request for expedited examination of a design application | |

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

40

SUBMITTED BY

Complete (if applicable)

| | | | | | |
|-------------------|-------------------|---------------------------------|--------|-----------|--------------|
| Name (Print/Type) | Michael B. McNeil | Registration No./Attorney/Agent | 35,149 | Telephone | 812-333-5355 |
| Signature | | Date | 8-8-03 | | |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.